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B1 (Official F	orm 1)(04						IICIII		gc I oi	JZ				
United States Bankruptcy C Northern District of Illinois					Court			Voluntary Petition			Petition			
Name of Deb Niday, Jo		vidual, ente	er Last, First	, Middle):					Name of Joint Debtor (Spouse) (Last, First, Middle): Niday, Dawn M.					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):								
Last four digi (if more than one, xxx-xx-36		Sec. or Indi	vidual-Taxp	ayer I.D. ((ITIN)/Com	nplete	EIN	(if more	our digits of than one, state	all)	r Individual-T	axpayer I.D	O. (ITIN) N	Io./Complete EIN
Street Addres 8310 Ruk Rockford	ss of Debto bicon Tra	•	Street, City,	and State)):	ZII	P Code	831	Address of	on Trail	(No. and Stre	eet, City, an	d State):	ZIP Code
County of Re Winneba		of the Princ	cipal Place o	f Busines		6110)7		y of Reside		Principal Place	ce of Busin	ess:	61107
Mailing Addr		tor (if diffe	rent from str	eet addres	ss):						tor (if differen	t from stree	t address):	:
Location of P	Principal As	ssets of Bus	siness Debto	r	Γ	ZII	P Code							ZIP Code
(if different fr	rom street a	address abo	ove):											
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests: Nature of Business (Check one box) Health Care Business Single Asset Real Estate as def in 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exempt Entity				defined	Chapt Chapt Chapt Chapt Chapt Chapt	the leer 7 eer 9 eer 11 eer 12	of a	ed (Check apter 15 Pe a Foreign M	one box) tition for I Iain Proce tition for I	Recognition eding Recognition				
Country of deb Each country i by, regarding,	in which a fo	oreign procee	eding	unde	(Check box tor is a tax-exer Title 26 of e (the Interna	x, if ap xempt the U	pplicable) organizat nited Stat	tion tes	"incurred by an individual primarily for a personal, family, or household purpose."					
debtor is un Form 3A.	Fee attached to be paid in ed application nable to pay	installments on for the cou fee except in	art's considera installments.	individual ion certifyi Rule 1006 7 individu	ing that the (b). See Office als only). Mu	t cial ust	Dec Check if: Dec are Check all A j	ebtor is a sn ebtor is not ebtor's aggreeless than S l applicable plan is bein ecceptances of	regate nonco \$2,490,925 (e boxes: ag filed with of the plan w	debtor as definess debtor as ontingent liquidamount subjectibles	ct to adjustmer	. § 101(51D) S.C. § 101(5 uding debts on at on 4/01/16	1D). owed to insi and every	ders or affiliates) / three years thereaf reditors,
	timates tha timates tha be no fund	t funds will t, after any Is available	be available	erty is ex	cluded and	admi	nistrativ		es paid,		THIS	SPACE IS FO	OR COURT	USE ONLY
Estimated Nu 1- 49	imber of Ci 50- 99	reditors 100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,0 25,0	001-	□ 25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Ass So to \$50,000	sets \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,0 to \$1 millio	000,001 S	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Lia \$0 to \$50,000	abilities \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,0 to \$1 millio	000,001 S	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				

Case 15-81674 Doc 1 Filed 06/25/15 Entered 06/25/15 13:52:19 Desc Main Document Page 2 of 52 B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Niday, John W. Niday, Dawn M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. /s/ Dennis L Leahy June 25, 2015 Signature of Attorney for Debtor(s) (Date) Dennis L Leahy Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

1 (0	Official Form 1)(04/13)	Document		age 3 01 52	Page 3
Vc	oluntary Petition			ne of Debtor(s): Niday, John W.	
(Th	is page must be completed and filed in every ca	ase)		Niday, Dawn M.	
		Sign	atur	es e	
X	Signature(s) of Debtor(s) (Individual/A I declare under penalty of perjury that the information propetition is true and correct. If petitioner is an individual whose debts are primarily of has chosen to file under chapter 7] I am aware that I may chapter 7, 11, 12, or 13 of title 11, United States Code, ur available under each such chapter, and choose to proceed [If no attorney represents me and no bankruptcy petition petition] I have obtained and read the notice required by I request relief in accordance with the chapter of title 11, specified in this petition. /s/ John W. Niday Signature of Debtor John W. Niday /s/ Dawn M. Niday Signature of Joint Debtor Dawn M. Niday	Joint) rovided in this consumer debts and reproceed under nderstand the relief d under chapter 7. preparer signs the 11 U.S.C. §342(b).	I iss provided the control of the co	Signature of a Foreign Representative declare under penalty of perjury that the information provided in this is true and correct, that I am the foreign representative of a debtor in a froceeding, and that I am authorized to file this petition. Check only one box.) I request relief in accordance with chapter 15 of title 11. United State Certified copies of the documents required by 11 U.S.C. §1515 are a Pursuant to 11 U.S.C. §1511, I request relief in accordance with the of title 11 specified in this petition. A certified copy of the order gran recognition of the foreign main proceeding is attached.	foreign es Code. attached. chapter
	Telephone Number (If not represented by attorney))	\vdash	Signature of Non-Attorney Bankruptcy Petition Prepare	er
×	June 25, 2015 Date Signature of Attorney* /s/ Dennis L Leahy Signature of Attorney for Debtor(s) Dennis L Leahy 1599046 Printed Name of Attorney for Debtor(s) Dennis L Leahy Firm Name One Court Place Suite 203 Rockford, IL 61101 Address Email: attyleahy@y			I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document f compensation and have provided the debtor with a copy of this document the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulga pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor of the maximum amount before preparing any document for filing for debtor or accepting any fee from the debtor, as required in that section Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social-Security number (If the bankrutpcy petition preparer is an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petiti preparer.)(Required by 11 U.S.C. § 110.)	or nent ated notice a n.
	Telephone Number June 25, 2015 Date *In a case in which § 707(b)(4)(D) applies, this signature certification that the attorney has no knowledge after an information in the schedules is incorrect.	e also constitutes a	X	Address	_
	Signature of Debtor (Corporation/Partr I declare under penalty of perjury that the information propertition is true and correct, and that I have been authorized on behalf of the debtor. The debtor requests relief in accordance with the chapter States Code, specified in this petition.	rovided in this ed to file this petition of title 11, United		Date Signature of bankruptcy petition preparer or officer, principal, response person, or partner whose Social Security number is provided above. Names and Social-Security numbers of all other individuals who prepassisted in preparing this document unless the bankruptcy petition prenot an individual:	pared or
	Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual			If more than one person prepared this document, attach additional she conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provistitle 11 and the Federal Rules of Bankruptcy Procedure may resignes or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.	sions of sult in

Date

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday Dawn M. Niday		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
<u> </u>	nseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for d	· -
± • •	109(h)(4) as impaired by reason of mental illness or mental
deficiency so as to be incapable of realizing a	and making rational decisions with respect to financial
responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. §	109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate i	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military co	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ John W. Niday
ϵ	John W. Niday
Date: June 25, 2015	

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday Dawn M. Niday		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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D (Official Form 1, Exhibit D) (12/09) - Cont. Page 2
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable attement.] [Must be accompanied by a motion for determination by the court.] ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling quirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Dawn M. Niday Dawn M. Niday
Date: June 25, 2015

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday,		Case No.	
	Dawn M. Niday			
_		Debtors	Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	122,000.00		
B - Personal Property	Yes	3	33,050.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		112,126.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		57,420.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,545.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,500.00
Total Number of Sheets of ALL Schedules		21			
	T	otal Assets	155,050.00		
			Total Liabilities	169,546.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday,		Case No.	
	Dawn M. Niday			
_		Debtors	Chapter	7
			•	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	36,575.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	36,575.00

State the following:

Average Income (from Schedule I, Line 12)	3,545.00
Average Expenses (from Schedule J, Line 22)	3,500.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	5,102.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		57,420.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		57,420.00

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B6A (Official Form 6A) (12/07)

In re	John W. Niday,	Case No.
	Dawn M. Niday	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
single family dwelling located at 8310 Rubicon Tr, Rockford, IL 61107	ownership	J	122,000.00	108,000.00

Sub-Total > 122,000.00 (Total of this page)

Total > 122,000.00

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B6B (Official Form 6B) (12/07)

In re	John W. Niday,	Case No
	Dawn M. Niday	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

					. ,
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Х			
2.	Checking, savings or other financial	Me	embers Alliance Credit Union - checking	J	100.00
	accounts, certificates of deposit, or shares in banks, savings and loan,	Me	embers Alliance Credit Union - savings	J	100.00
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or	Mi	Il City Credit Union - savings	Н	50.00
	cooperatives.	Mi	Il city Credit Union - checking	W	50.00
		Mi	Il City Credit Union - savings	W	50.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings,	Н	ousehold goods and furnishings	J	1,500.00
	including audio, video, and computer equipment.	со	mputer	J	200.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Х			
6.	Wearing apparel.	De	ebtors' clothing	J	500.00
7.	Furs and jewelry.	Χ			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies.	Lif	e insurance policy with death benefit only	W	0.00
	Name insurance company of each policy and itemize surrender or refund value of each.	Lif	e insurance policy with death benefit only	Н	0.00
10.	Annuities. Itemize and name each issuer.	X			
				Sub-Tota (Total of this page)	al > 2,550.00

² continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In	re John W. Niday,			Case No.			
	<u> </u>	Debtors SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)					
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption		
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X					
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	401k		Н	25,000.00		
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X					
14.	Interests in partnerships or joint ventures. Itemize.	X					
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X					
16.	Accounts receivable.	Х					
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X					
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X					
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X					
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X					
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X					

Sub-Total > (Total of this page)

25,000.00

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	John W.	Niday,
	Dawn M	Niday

Debtors SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Pro	perty NON NN E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, intellectual property particulars.	and other X. Give			
23. Licenses, franchises general intangibles. particulars.	, and other X Give			
24. Customer lists or oth containing personal information (as define § 101(41A)) provide by individuals in coobtaining a product the debtor primarily family, or household	y identifiable ned in 11 U.S.C. ed to the debtor nnection with or service from for personal,			
25. Automobiles, trucks	, trailers, and	2004 Dodge Stratus (150,000 miles)	J	3,000.00
other vehicles and a	ccessories.	2003 Dodge Durango (100,000 miles)	J	2,000.00
		1997 Ford/Mercury	J	500.00
26. Boats, motors, and a	accessories. X			
27. Aircraft and accesso	ories. X			
28. Office equipment, for supplies.	urnishings, and X			
29. Machinery, fixtures, supplies used in bus	equipment, and X iness.			
30. Inventory.	X			
31. Animals.	Х			
32. Crops - growing or particulars.	narvested. Give X			
33. Farming equipment implements.	and X			
34. Farm supplies, chen	nicals, and feed. X			
35. Other personal prop not already listed. It	erty of any kind X emize.			

Sheet $\underline{2}$ of $\underline{2}$ continuation sheets attached to the Schedule of Personal Property

| Sub-Total > 5,500.00 (Total of this page) | Total > 33,050.00

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	John W. Niday,	Case No
	Dawn M. Niday	

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor clain	ns the e	xemptions	to which	i debtor :	is entitled	l under:
(Check one	hox)					

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) ☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years therea with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property single family dwelling located at 8310 Rubicon Tr, Rockford, IL 61107	735 ILCS 5/12-901	30,000.00	122,000.00
Checking, Savings, or Other Financial Accounts, Certification of Checking Members Alliance Credit Union - checking	ficates of Deposit 735 ILCS 5/12-1001(b)	100.00	100.00
Members Alliance Credit Union - savings	735 ILCS 5/12-1001(b)	100.00	100.00
Mill City Credit Union - savings	735 ILCS 5/12-1001(b)	50.00	50.00
Mill city Credit Union - checking	735 ILCS 5/12-1001(b)	50.00	50.00
Mill City Credit Union - savings	735 ILCS 5/12-1001(b)	50.00	50.00
Household Goods and Furnishings Household goods and furnishings	735 ILCS 5/12-1001(b)	1,500.00	1,500.00
computer	735 ILCS 5/12-1001(b)	200.00	200.00
Wearing Apparel Debtors' clothing	735 ILCS 5/12-1001(a)	500.00	500.00
Interests in IRA, ERISA, Keogh, or Other Pension or P 401k	Profit Sharing Plans 735 ILCS 5/12-1006	100%	25,000.00
Automobiles, Trucks, Trailers, and Other Vehicles 2004 Dodge Stratus (150,000 miles)	735 ILCS 5/12-1001(c)	2,400.00	3,000.00
2003 Dodge Durango (100,000 miles)	735 ILCS 5/12-1001(c)	2,000.00	2,000.00
1997 Ford/Mercury	735 ILCS 5/12-1001(b)	500.00	500.00

Total:	62 450 00	155 050 00
TODAL:	07 400 00	133 030 00

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B6D (Official Form 6D) (12/07)

•		
In re	John W. Niday,	Case No
	Dawn M. Niday	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	LLQUL	I SP UT E	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx6592			Opened 7/01/99 Last Active 2/27/15	T	D A T E D			
Bank of America Attn: Correspondence Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062		J	mortgage against residence 8310 Rubicon Trail, Rockford IL 61107 Value \$ 122,000,00				75 000 00	0.00
Account No. xxx1277	╫	╁	Value \$ 122,000.00 home equity loan	\vdash		Н	75,000.00	0.00
Beneficial Corporation 5416 E. State St. College Centre Rockford, IL 61108		J	8310 Rubicon Trail, Rockford, IL 61107					
			Value \$ 122,000.00				33,000.00	0.00
Account No. xxx6601			Opened 3/01/13 Last Active 8/29/14					
Personal Finance 270 N Mulford Road Rockford, IL 61107		J	loan Household Goods Secured					
			Value \$ 5,000.00	1			4,126.00	0.00
Account No.			Value \$					
0 continuation sheets attached		<u> </u>	<u> </u>	Subt his			112,126.00	0.00
	112,126.00	0.00						

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B6E (Official Form 6E) (4/13)

·				
In re	John W. Niday,		Case No.	
	Dawn M. Niday			
-		Debtors	 ;	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible related of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sa representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busin whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Fede Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10)

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	John W. Niday, Dawn M. Niday		Case No.	
-		Debtors	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	ç	1	Hus	band, Wife, Joint, or Community		C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R		C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAII IS SUBJECT TO SETOFF, SO STATE.	М	ONTINGENT	N	DISPUTED	AMOUNT OF CLAIM
Account No. xxx3310		Ī		Opened 10/01/08 Last Active 9/03/14		T	DATED		
Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899		,	W	credit purchases	_		D		2,482.00
Account No.	_	t		Opened 8/01/13 Last Active 8/19/14					
Behavioral Medicine Neuro Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108		١	W	medical					473.00
Account No.		t		credit purchases					
Better Homes & Gardens North Shore Agency PO Box 9205 Old Bethpage, NY 11804-9005			J						36.00
Account No.	+	ł		loan					30.00
Blue Chip Financial 914 Chief Little Shell St SE P.O. Box 720 Belcourt, ND 58316			J						500.00
7_ continuation sheets attached Subtotal (Total of this page)								3,491.00	

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case No.
	Dawn M. Niday	

					_		-	
CREDITOR'S NAME,	0	H	sband, Wife, Joint, or Community		CO	N	ו	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	T A TM	NT L NG E N	UZLLQULDAHED		AMOUNT OF CLAIM
Account No.			notice only		Т	T E		
Cach, LLC / GE Money Retail Bank John C. Bonewicz, PC 350 N Orleans St. #300 Chicago, IL 60654		J				D		0.00
Account No.	Г		Opened 12/01/13 Last Active 12/15/14					
City of Rockford-Ambulance Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108		W	medical					678.00
Account No.	Н	H	medical					
DLX Medical Group 461 N Mulford Rockford, IL 61107-5165		J						21.00
A AV	L		On a real 0/04/40 Least Astine 0/04/45					21.00
Account No. Fed Loan Serv			Opened 9/01/12 Last Active 3/31/15 Educational					
Po Box 60610 Harrisburg, PA 17106		W						
								36,575.00
Account No. xxxx7801			Opened 9/01/13 Last Active 8/18/14 loan					
GE Money Retail Bank Cach, LLC / Square Two Financial Attn: Bankruptcy 4340 S Monaco St., 2nd Floor		Н						
Denver, CO 80237								1,566.00
Sheet no1 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	-		(*	S (Total of th		ota pag		38,840.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case	e No
	Dawn M. Niday		

	1	Τ.	L. L. L. L. C.	- 1		. -		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	F V J	CONSIDERATION FOR CLAIM. IF CLAIM			J [] N I S E N I S E N I S E N I S E N I S E N I S E S S E S S E S S E S S E S S E S S E S S S S S S S S S S		AMOUNT OF CLAIM
Account No. xxx0001			Opened 3/01/11 Last Active 3/26/15	Т				
General Mills Fcu/Mill City Credit Union 9999 Wayzata Blvd Minnetonka, MN 55305		F	personal loan					1,413.00
Account No.		T	medical		T		T	
Illinois Pathologist Service PO Box 9846 Peoria, IL 61612		V	V					106.00
Account No.	t	t	medical	+	$^{+}$	+	+	
Illinois Pathologist Services P.O. Box 9846 Peoria, IL 61612		J						300.00
Account No. xxx2219	t	t	Opened 7/01/08 Last Active 10/02/13		t	\dagger	\dagger	
Merrick Bk Attn: Bankruptcy P.O. Box 9201 Old Bethpage, NY 11804		J	credit purchases					3,096.00
Account No.	t	t	notice only	+	+	+	+	
Merrick Bk Phillips & Cohen Associates Mail Stop: 146 1002 Justison St. Wilmington, DE 19801-5148	-1	J						0.00
Sheet no. 2 of 7 sheets attached to Schedule of	_		ı	Sul	oto	tal	†	4.045.00
Creditors Holding Unsecured Nonpriority Claims			(Total e	f this	pa	ige)) [4,915.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case No.
	Dawn M. Niday	

	_	T		T_	1	T =	T
CREDITOR'S NAME,	000	L	sband, Wife, Joint, or Community	C O N T	UNLI	l s	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	Q U I	DISPUTED	AMOUNT OF CLAIM
Account No.			medical	Т	D A T E D		
Mutual Management 7177 Crimson Ridge Dr. #10 Rockford, IL 61107		J			D		1,675.00
Account No.	H		medical				
OSF Healthcare System 7978 Solution Center Chicago, IL 60677-7009		W					890.00
Account No.			Opened 11/01/14			_	890.00
OSF St Anthony Medical Center Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108		W	medical				952.00
Account No.			medical	+	t		
OSF St Anthony Medical Center 5666 E State St Rockford, IL 61108		W					130.00
Account No. xxx9124	\vdash		Opened 10/01/13		H		.53.66
Regina Bielkus, MD ATG Credit 1700 W Cortland St. #2 Chicago, IL 60622		W	medical				72.00
Sheet no. 3 of 7 sheets attached to Schedule of		_		Sub	tota	ıl	2.740.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	3,719.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case No.
	Dawn M. Niday	

CREDITOR'S NAME, MAILING ADDRISS INCLUDING ZIP CODE. AND ACCOUNT NUMBER (See instructions above.) Account No. xxx6419 Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 Account No. Rockford Anesthesiologists PO Box 4659 Rockford, IL 61110 Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4— of _T_ sheets attached to Schedule of Creditors Protoling Insecured Nonpriority Claims Rockford Orthopedic Insecured Nonpriority Claims Rockford Orthopedic Associates Box 78620 Sheet no. 4— of _T_ sheets attached to Schedule of Creditors Protoling Insecured Nonpriority Claims Rockford Orthopedic Insecured Nonpriority Claims Rockford Orthopedic Ropedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Rockford Orthopedic Associates Box 78620 Sheet no. 4— of _T_ sheets attached to Schedule of Creditors Flotding Unsecured Nonpriority Claims Rockford Orthopedic Insecured Nonpriority Claims Rockford Orthopedic Ropedic Rop		T ~	1		1.		1-	
Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 W		000		•		N	Ϊ́	
Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 W	MAILING ADDRESS	E		DATE CLAIM WAS INCURRED AND	I N		P	
Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 W		B		CONSIDERATION FOR CLAIM. IF CLAIM	I N	ı Q	Į U	AMOUNT OF CLAIM
Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 W		O R			G E	i I D	E	
Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101 W	Account No. xxx6419		r			I A T E		
Creditors Protection Service PO Box 4115 Rockford, IL 61101 Account No. Rockford Anesthesiologists Rockford Anesthesiologists Rockford Anesthesiologists Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Milwaukee, WI 53278-8620 What medical W		1		medical	\vdash	D	\perp	4
PO Box 4115 Rockford, IL 61101 Account No. Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110 Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7_sheets attached to Schedule of Medical		l	١.,	.]				
Rockford, IL 61101 Account No. Rockford Anesthesiologists PO Box 4569 Rockford Appliance Co 422 E State St. Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Co 427 Francoist Rockford Orthopedic Appliance Co 428 Francoist Rockford Orthopedic Appliance Co 429 Francoist Rockford Orthopedic Appliance Co 420 Francoist Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of Schedule o		l	l۷	V				
Account No. Rockford Anesthesiologists PO Box 4569 Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Co 422 E State St. Rockford Orthopedic Appliance Co 423 E State St. Rockford Orthopedic Appliance Co 424 E State St. Rockford Orthopedic Appliance Co 425 E State St. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4_ of 7_ sheets attached to Schedule of Subtotal Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4_ of 7_ sheets attached to Schedule of		l						
Account No. Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110 Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no4_ of _7_ sheets attached to Schedule of Milwaukee, Subtact Rockford Orthopedic Aspelance Subtact Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Rockford Orthopedic Associates Rockford Orthop	Rockford, IL 61101	l						
W W W W W W W W W W		L			_			348.00
PO Box 4569 Rockford, IL 61110 Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Co 470 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of	Account No.	ł		medical				
PO Box 4569 Rockford, IL 61110 Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Co 470 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of	Rockford Anesthesiologists							
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Account No. Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of		l						
Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4_ of 7_ sheets attached to Schedule of W N N Notice only M M Medical M M Medical M M M M M M M M M M M M M								255.00
422 E State St. Rockford, IL 61104 Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4_ of 7_ sheets attached to Schedule of W Indice only Indice on	Account No.		T	medical	T	1	T	
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Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of No. 47.00 47.00 47.00 47.00 47.00 47.00 47.00 47.00 47.00 47.00 47.00		l	l۷	V				
Account No. Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4— of 7— sheets attached to Schedule of Notice only Medical Medical Medical To sheets attached to Schedule of Subtoal To sheet no. 4— of 7— sheets attached to Schedule of	Rockford, IL 61104	l						
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Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of Subtotal		1						
Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no. 4 of 7 sheets attached to Schedule of Subtotal	Rockford Orthopedic Appliance	l						
507 Prudential Rd Horsham, PA 19044		l	J					
Horsham, PA 19044 0.00 Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no4 of _7 sheets attached to Schedule of	Transworld Systems Inc.	l						
Account No. Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no4 of _7 sheets attached to Schedule of Rockford Orthopedic Associates Subtotal	507 Prudential Rd	l						
Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620 Sheet no4 of _7 sheets attached to Schedule of Subtotal 7555.00	Horsham, PA 19044							0.00
Box 78620 Milwaukee, WI 53278-8620 Sheet no4 of _7 sheets attached to Schedule of Subtotal	Account No.	T	H	medical	\dagger	\dagger	+	
Box 78620 Milwaukee, WI 53278-8620 Sheet no4 of _7 sheets attached to Schedule of Subtotal		1						
Milwaukee, WI 53278-8620 105.00 Sheet no. 4 of 7 sheets attached to Schedule of Subtotal		1	١.,	,				
Sheet no. 4 of 7 sheets attached to Schedule of Subtotal		1	١٧'	Y				
Sheet no. 4 of 7 sheets attached to Schedule of Subtotal	IVIIIWaukee, VVI 53278-8620							
Sheet no. 4 of 7 sheets attached to Schedule of Subtotal								105.00
I 755 00 1								105.00
Creditors Holding Unsecured Nonpriority Claims (Total of this page)								755.00
	Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)	7 33.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case No.
_	Dawn M. Niday	

	I c	Тн	usband, Wife, Joint, or Community	Ic	U	D	Ī
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGEN	Q	SPUTED	AMOUNT OF CLAIM
Account No.			notice only	٦т	T E		
Rockford Orthopedic Associates Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108		V	v		D		0.00
Account No.	t		medical	\top			
Rockford Psychiatric Med Services P.O. Box 957 Rockford, IL 61105-0957		J					12.00
Account No.	╁		medical	+		\vdash	
Rockford Radiology PO Box 44269 Madison, WI 53744-4269		V	V				32.00
Account No.	╁		medical	+	+	+	
Rockford Spine Center PO Box 4533 Carol Stream, IL 60197		V	V				465.00
Account No. xxx0145	╁	-	Opened 9/01/14	+	+	+	.55.56
Rockford Surgical Service Accounts Receivable Mgmt 7834 N 2nd St. #5 Machesney Park, IL 61115		V	medical				479.00
Sheet no5 of _7 sheets attached to Schedule of			1	Sub	tot:	 a1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				988.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case No.
	Dawn M. Niday	

		ш	sband, Wife, Joint, or Community	1	ш	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.			notice only	Т	T E		
SPOT Loan P.O. Box 927 Palatine, IL 60078-0927		J			D		0.00
Account No.			medical				
Swedish American Hospital 1401 E State St. Rockford, IL 61104		W					50.00
Account No.			medical				
Swedish American Hospital Mutual Management Svcs co, LLC PO Box 8740 Rockford, IL 61126		w					3,012.00
Account No.			credit purchases				
TruGreen #5747 P.O. Box 9001128 Louisville, KY 40290-1128		J					82.00
Account No.	\vdash		notice only	+			
TruGreen #5747 Transworld Systems 507 Prudential Rd Horsham, PA 19044		J					0.00
Sheet no. 6 of 7 sheets attached to Schedule of			1	Subt	tota	1	0.444.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	3,144.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	John W. Niday,	Case	e No
	Dawn M. Niday		

CDEDITODIS NAME	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	02112682	N L I QU I D A	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx9839			Opened 4/01/13 Last Active 4/26/14	ĪΫ	Ē		
Weisfield Jewelers/Sterling Jewelers Inc Attn: Bankruptcy Po Box 1799 Akron, OH 44309		J	credit purchases		D		1,568.00
Account No.	T			\top	T		
Account No.							
Account No.	╁			+			
Account No.	T						
Sheet no7 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub this			1,568.00
			(Report on Summary of S		Γota dule		57,420.00

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B6G (Official Form 6G) (12/07)

In re	John W. Niday,	Case No.
	Dawn M. Niday	

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-81674 Doc 1 Filed 06/25/15 Entered 06/25/15 13:52:19 Desc Main Document Page 26 of 52

B6H (Official Form 6H) (12/07)

In re	John W. Niday,	Case No
	Dawn M. Niday	

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information t	o identify your ca	ase:								
Del	otor 1	John W. Nid	ay								
	otor 2 ouse, if filing)	Dawn M. Nid	lay			_					
Uni	ted States Bankrup	tcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
_	se number nown)						□ An		d filing ent show	ing post-petitic	
\bigcirc	fficial Form	B 6I								following date	C
	chedule I: `						MN	M / DD/ Y	YYY		12/13
sup spo atta	plying correct info use. If you are sep ch a separate shee	ormation. If you parated and you et to this form.	sible. If two married pec are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	spouse i de inforr	is liv natio	ng with	you, incl your sp	lude info ouse. If	ormation abou more space is	ut your s needed,
Par	t 1: Describe	e Employment									
1.	Fill in your emploinformation.	oyment		Debtor 1				Debtor 2	or non-	-filing spouse	
	If you have more		Employment status	■ Employed				■ Emplo	oyed		
	attach a separate page with information about additional		, ,	☐ Not employed				☐ Not employed			
	employers.		Occupation	Line operator							
	Include part-time, self-employed wo		Employer's name	General Mills				Genera	l Mills		
	Occupation may in or homemaker, if		Employer's address	Belvidere, IL 610	08			Belvide	re, IL 6	1008	
			How long employed the	here? 8 yrs				_			
Par	rt 2: Give Det	tails About Mor	nthly Income								
	mate monthly incouse unless you are s		ate you file this form. If	you have nothing to re	eport for	any I	ine, write	\$0 in the	space.	Include your n	on-filing
•	ou or your non-filing e space, attach a se	•	ore than one employer, co	ombine the information	n for all e	emplo	yers for t	that pers	on on the	e lines below. I	f you need
							For Debt	tor 1		ebtor 2 or iling spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	3,4	453.00	\$	1,506.00	-
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$_		0.00	+\$	0.00	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	3,45	3.00	\$_	1,506.00	

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John W. Niday Debtor 1 Debtor 2 Dawn M. Niday Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 3.453.00 1.506.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 643.00 141.00 Mandatory contributions for retirement plans 5b. \$ 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 309.00 0.00 Required repayments of retirement fund loans 5d. 5d. 128.00 0.00 5e. Insurance 5e. 158.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 0.00 5h. Other deductions. Specify: United Way 5h.+ 35.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1,273.00 141.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 2,180.00 \$ 1,365.00 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 0.00 8a. \$ Interest and dividends 8h. 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 0.00 Other monthly income. Specify: 8h.+ 8h. \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. 2.180.00 \$ 3,545.00 \$ 1.365.00 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,545.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? П Yes. Explain: Wife receives long term disability insurance benefits from employer.

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Fill	in this inform	ation to identify y	our case:					
Debt	tor 1	John W. Nid	ay			Ch	eck if this is:	
							An amended filing	
Debt (Spo	tor 2 ouse, if filing)	Dawn M. Nic	lay				A supplement shown 13 expenses as of	ving post-petition chapter the following date:
Unite	ed States Bank	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)						A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
Of	ficial Fo	orm B 6J			_			
		J: Your						12/13
info nun	ormation. If r	more space is ne vn). Answer eve	eeded, atta ry questio	. If two married people and the control of the cont				
Part	Is this a join	ribe Your House	ehold					
١.	□ No. Go t							
		es Debtor 2 live	in a conar	rata housahold?				
			iii a sepai	ate nousenoid:				
	■ 1		st file a sep	parate Schedule J.				
2.	Do you hav	ve dependents?	■ No					
	Do not list I and Debtor		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses of yourself ar	penses include of people other t nd your depende	than ents?	No Yes				☐ Yes
exp	imate your e	a date after the	our bankr	iy Expenses uptcy filing date unless y y is filed. If this is a supp				
the		ch assistance an		government assistance i cluded it on Schedule I: \			Your exp	enses
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4.	\$	1,100.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner'	s, or renter	's insurance		4b.	· -	0.00
	4c. Home	e maintenance, re	epair, and u	upkeep expenses		4c.	\$	100.00
_		eowner's associa				4d.	· -	0.00
5.	Additional	mortgage payme	ents for vo	our residence , such as ho	me equity loans	5.	5	0.00

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		John W. Niday Dawn M. Niday		Case number (if known)		
6.	Utilities:					
	•	heat, natural gas	6a.	· ·	250.00	
		wer, garbage collection	6b.		150.00	
	•	e, cell phone, Internet, satellite, and cable services	6c.		400.00	
	6d. Other. Spe	·	6d.	· ·	0.00	
7.		ekeeping supplies	7.	\$	500.00	
8.		children's education costs	8.	\$	0.00	
9.	•	ry, and dry cleaning	· — — — — — — — — — — — — — — — — — — —			
10.	•	products and services	10.		75.00	
11.		Medical and dental expenses 11. \$				
12.		Include gas, maintenance, bus or train fare.	12.	\$	150.00	
10	Do not include co		13.	\$		
		clubs, recreation, newspapers, magazines, and books		· ·	0.00	
		ributions and religious donations	14.	\$	0.00	
15.	Insurance.	surance deducted from your pay or included in lines 4 or 20.				
	15a. Life insura	, , ,	15a.	\$	150.00	
	15b. Health ins		15a.	·	0.00	
	15c. Vehicle in		15c.	-	150.00	
	15d. Other insu		15d.		0.00	
16		clude taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00	
	Specify:		16.	\$	0.00	
17.		ents for Vehicle 1	17a.	\$	170.00	
		ents for Vehicle 2	17b.		130.00	
	17c. Other. Spe		17c.	*	0.00	
	17d. Other. Spe		17d.	·	0.00	
18		of alimony, maintenance, and support that you did not report a		Ψ	0.00	
		your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00	
19.		s you make to support others who do not live with you.		\$	0.00	
	Specify:		19.			
20.	Other real prop	erty expenses not included in lines 4 or 5 of this form or on Sc	hedule I: Y	our Income.		
	20a. Mortgages	s on other property	20a.	\$	0.00	
	20b. Real estat	e taxes	20b.	\$	0.00	
	20c. Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00	
	20d. Maintenar	ice, repair, and upkeep expenses	20d.	\$	0.00	
	20e. Homeown	er's association or condominium dues	20e.	\$	0.00	
21.	Other: Specify:		21.	+\$	0.00	
	V 411			•	2.502.00	
22.	•	xpenses. Add lines 4 through 21.	22.	\$	3,500.00	
00	•	r monthly expenses.				
23.	•	monthly net income.	00-	c	0.545.00	
		12 (your combined monthly income) from Schedule I.	23a.		3,545.00	
	23b. Copy your	monthly expenses from line 22 above.	23b.	-\$	3,500.00	
		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	45.00	
24.	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ■ No. □ Yes.					
	Explain:					

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday Dawn M. Niday			Case No.					
			Debtor(s)	Chapter	7				
	DECLARATION CONCERNING DEBTOR'S SCHEDULES								
	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR								
I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.									
Date	June 25, 2015	Signature	/s/ John W. Niday John W. Niday Debtor						
Date	June 25, 2015	Signature	/s/ Dawn M. Niday Dawn M. Niday Joint Debtor						

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday Dawn M. Niday	Case No.	
		Debtor(s) Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$61,045.00 2014: earnings \$71,279.00 2013: earnings

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$1,078.00 2013**

Withdrawn from 401k

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3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITORDATES OF
PAYMENTSAMOUNT STILL
AMOUNT PAIDAMOUNT STILL
OWINGBank of AmericaMarch, April, May\$3,300.00\$89,000.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
OR TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1000

Dennis L Leahy One Court Place Suite 203 Rockford, IL 61101

credit counseling 2015

2014

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

NSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

TE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF

GOVERNMENTAL UNIT DOCKET NUMBER STATUS OR DISPOSITION

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18 . Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 25, 2015	Signature	/s/ John W. Niday	
		_	John W. Niday	
			Debtor	
Date	June 25, 2015	Signature	/s/ Dawn M. Niday	
		_	Dawn M. Niday	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

John W. Niday In re Dawn M. Niday			Case No.	
	De	ebtor(s)	Chapter	7
PART A - Debts secured by property property of the estate. Attacl		ıst be fully co		
Property No. 1				
Creditor's Name: Bank of America			erty Securing Debt Trail, Rockford IL 6	
Property will be (check one): ☐ Surrendered	■ Retained			
If retaining the property, I intend to (che ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _ make payment		example, avoi	d lien using 11 U.S.0	C. § 522(f)).
Property is (check one): Claimed as Exempt		☐ Not claimed	as exempt	
Property No. 2				
Creditor's Name: Personal Finance		Describe Prope Household Go	erty Securing Debt ods Secured	:
Property will be (check one): ☐ Surrendered	■ Retained			
If retaining the property, I intend to (che ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain	eck at least one): (for example, avoid	d lien using 11	U.S.C. § 522(f)).	
Property is (check one): ■ Claimed as Exempt		☐ Not claimed	as exempt	
PART B - Personal property subject to u Attach additional pages if necessary.)	nexpired leases. (All three c	olumns of Part	B must be complete	d for each unexpired lease.
Property No. 1			Г	_
Lessor's Name: -NONE-	Describe Leased Prop	erty:	Lease will be U.S.C. § 365 ☐ YES	Assumed pursuant to 11 (p)(2):

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	June 25, 2015	Signature	/s/ John W. Niday	
			John W. Niday	
			Debtor	
Date	June 25, 2015	Signature	/s/ Dawn M. Niday	
			Dawn M. Niday	
			Ioint Debtor	

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United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday ^e Dawn M. Niday		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSUDE OF COMDI	ENICATION OF ATTOR	NEV EOD DE	'DTAD(C)	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	MEI FOR DE	ADTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or	to
	For legal services, I have agreed to accept			1,000.00	
	Prior to the filing of this statement I have received	1		1,000.00	
	D-1 D		¢	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	pers and associates of my law fi	rm.
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the n				
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and reneb. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 	atement of affairs and plan which itors and confirmation hearing, an reduce to market value; exe	may be required; ad any adjourned hea	rings thereof;	
	522(f)(2)(A) for avoidance of liens on h		and ming or mot	one pareaunt to 11 000	
б.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	ee does not include the following lischargeability actions, judio	service: cial lien avoidanc	es, relief from stay actions	or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	presentation of the debtor(s) in	
Date	ed: June 25, 2015	/s/ Dennis L Leah	у		
		Dennis L Leahy			
		Dennis L Leahy One Court Place S	Suite 203		
		Rockford, IL 6110			
		815 964-9600 Fax	x: 815 964-9620		
		attyleahy@yahoo.	.com		

DENNIS L. LEAHY
Attorney At Law
One Court Place Suite 203
Rockford, IL 61101
815/964-9600

CONTRACT FOR CHAPTER 7 BANKRUPTCY

This agreement is executed this 5×10^{10} day of 100×10^{10} .
Type of Bankruptcy:
Client retains Attorney Dennis L. Leahy to file a Chapter 7 bankruptcy.
Services Provided by Attorney:
Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.
Fees:
The base fee for the filing of the bankruptcy is $\frac{1}{200}$, the filing fee $\frac{4335}{20}$, and the credit report is $\frac{1}{200}$, for a total of $\frac{1}{200}$, to be paid prior to filing. The amount of the filing fee may increase, as determined by Congress.
Additional costs required on a case by case basis include:
 Mandatory prepetition credit counseling and post petition financial education. Asset verification report (when required by attorney)
If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney is increased, the fee shall be increased accordingly to compensate the Attorney for the additional time and expense in providing the legal services.
Terms of Payment:
 The fees shall be paid in full prior to the filing of the bankruptcy. Client has paid \$ as a retainer fee. This amount has been earned upon receipt by the attorney and is non-refundable. No earned portion of any fee is refundable.
Services Not Provided Under the Base Fee:
Beautiful does not include defense of discharge or dischargeability proceedings.

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreement.

Compensation for Services Not Covered Under Base Fee:

- 1. Fees for additional services shall be paid at \$250.00 per hour plus costs (when applicable)
- 2. \$75.00 for preparation and filing of each amendment to the bankruptcy.
- 3. \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement and attendance at hearing if required by the court.
- 4. \$500.00 plus filing fee for motion to reopen bankruptcy.

The client understands that if the client does not pay the fees as set forth above, the attorney has no obligation to provide the services.

Clients Obligations:

- 1. To pay the fees as set forth above.
- 2. To provide accurately, honestly and in a timely manner, all of the information including all documents necessary to prepare and file the bankruptcy.
- 3. To satisfy prepetition credit counseling and post-petition financial education requirements.
- 4. To keep the attorney advised of the clients address and telephone number.
- 5. To attend the 341 Meeting of Creditors and other hearings set in the case as advised by the attorney.
- 6. To provide any information requested of the client by the Bankruptcy Trustee, the U.S. Trustee, or any other party in interest, unless the court rules that the client is not required to provide the information.
- 7. To respond immediately to any request of the client by the attorney or the attorney's staff.
- 8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Client acknowledges receipt of a copy of this agreement.

Dennis L. Leahy

Client

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

		Northern District of Inhiois		
In re	John W. Niday Dawn M. Niday		Case No.	
		Debtor(s)	Chapter7	7
		N OF NOTICE TO CONSUM 342(b) OF THE BANKRUPT	`	5)
		Certification of Debtor		
	I (We), the debtor(s), affirm that I (we) h	ave received and read the attached no	otice, as required by	§ 342(b) of the Bankruptcy
Code.				
	W. Niday M. Niday	X /s/ John W. Ni	day	June 25, 2015
Printec	d Name(s) of Debtor(s)	Signature of De	ebtor	Date
Case N	No. (if known)	X /s/ Dawn M. Ni	iday	June 25, 2015
		Signature of Jo	int Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Northern District of Illinois

In re	John W. Niday Dawn M. Niday		Case No.	
	•	Debtor(s)	Chapter 7	
	VEI	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	38
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of credit	fors is true and correct to	the best of my
Date:	June 25, 2015	/s/ John W. Niday		
		John W. Niday		
		Signature of Debtor		
Date:	June 25, 2015	/s/ Dawn M. Niday		
		Dawn M. Niday		
		Signature of Debtor		

Bank of America Attn: Correspondence Unit/CA6-919-02-41 Po Box 5170 Simi Valley, CA 93062

Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899

Behavioral Medicine Neuro Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

Beneficial Corporation 5416 E. State St. College Centre Rockford, IL 61108

Better Homes & Gardens North Shore Agency PO Box 9205 Old Bethpage, NY 11804-9005

Blue Chip Financial 914 Chief Little Shell St SE P.O. Box 720 Belcourt, ND 58316

Cach, LLC / GE Money Retail Bank John C. Bonewicz, PC 350 N Orleans St. #300 Chicago, IL 60654

City of Rockford-Ambulance Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

DLX Medical Group 461 N Mulford Rockford, IL 61107-5165 Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

GE Money Retail Bank Cach, LLC / Square Two Financial Attn: Bankruptcy 4340 S Monaco St., 2nd Floor Denver, CO 80237

General Mills Fcu/Mill City Credit Union 9999 Wayzata Blvd Minnetonka, MN 55305

Illinois Pathologist Service PO Box 9846 Peoria, IL 61612

Illinois Pathologist Services P.O. Box 9846 Peoria, IL 61612

Merrick Bk Attn: Bankruptcy P.O. Box 9201 Old Bethpage, NY 11804

Merrick Bk Phillips & Cohen Associates Mail Stop: 146 1002 Justison St. Wilmington, DE 19801-5148

Mutual Management 7177 Crimson Ridge Dr. #10 Rockford, IL 61107

OSF Healthcare System 7978 Solution Center Chicago, IL 60677-7009

OSF St Anthony Medical Center Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108 OSF St Anthony Medical Center 5666 E State St Rockford, IL 61108

Personal Finance 270 N Mulford Road Rockford, IL 61107

Regina Bielkus, MD ATG Credit 1700 W Cortland St. #2 Chicago, IL 60622

Rockford Anesthesiologists Creditors Protection Service PO Box 4115 Rockford, IL 61101

Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110

Rockford Orthopedic Appliance Co 422 E State St. Rockford, IL 61104

Rockford Orthopedic Appliance Company Transworld Systems Inc. 507 Prudential Rd Horsham, PA 19044

Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278-8620

Rockford Orthopedic Associates Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108

Rockford Psychiatric Med Services P.O. Box 957 Rockford, IL 61105-0957

Rockford Radiology PO Box 44269 Madison, WI 53744-4269

Rockford Spine Center PO Box 4533 Carol Stream, IL 60197

Rockford Surgical Service Accounts Receivable Mgmt 7834 N 2nd St. #5 Machesney Park, IL 61115

SPOT Loan P.O. Box 927 Palatine, IL 60078-0927

Swedish American Hospital 1401 E State St. Rockford, IL 61104

Swedish American Hospital Mutual Management Svcs co, LLC PO Box 8740 Rockford, IL 61126

TruGreen #5747 P.O. Box 9001128 Louisville, KY 40290-1128

TruGreen #5747 Transworld Systems 507 Prudential Rd Horsham, PA 19044

Weisfield Jewelers/Sterling Jewelers Inc Attn: Bankruptcy Po Box 1799 Akron, OH 44309